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II .	MENT TRANSMI nes E. STAARGAARE	), et al	irge Ei	itity)		H	C.00001US
Application No. 10/627,910	Filing Date 07/25/2003	Examiner Patricia L. Nordme	yer	Customer N 30853	lo.	Group Art Unit	Confirmation No.
Invention:	Cit	G PLASTIC TO A MET	TAL SEC	CTION AND	PA	RT MADE TH	EREBY
PROPERTY INAL	the an amondment is	COMMISSIONER FO					
		mitted as shown below		JII.			
		CLAIMS AS AM	IENDED	)			
	CLAIMS REMAINING	HIGHEST #	NUMB	ER EXTRA		RATE	ADDITIONAL
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS	PRESENT			FEE
TOTAL CLAIMS	24 -	21 =		3	x	\$50.00	\$150.00
INDEP. CLAIMS	2 -	3 =	l .	0	X	\$200.00	\$0.00 \$0.00
Multiple Dependen	t Claims (check if app	TOTAL ADDITIONAL		D THIC AME	- NIF	MENT	\$150.00
☐ A check in ☑ The Direct communic ☑ Any a ☐ Any p ☐ Payment b WARNING	ation or credit any ove dditional filing fees red atent application proce y credit card. Form PT : Information on this	to cover the filing d to charge payment of expayment to Deposit Acquired under 37 C.F.R. essing fees under 37 C	the folloccount 1.16. FR 1.17	owing fees as edit card in authorizatio	fori n o	ciated with this mation should n PTO-2038.	
(2) Amendment Tr Fee - Charge to (1) Amend and Re: (2) Petition for Ex (2) Fee Transmitta	Signature HOFFMANN (Reg. N. ansmittal Letter (\$150 ) Deposit Account) s to Ofice Action dated tension of Time - 3 mon If for FY 2005 (\$1,020 ) I Card) - (2) PTO For d	Amendment 07-15-2004 nths Extension fee	I herel the Ur class n P.O. B	by certify that sited States Ponail in an entire of the control of	this stal ope adria	correspondence Service with suf addressed to "Cor	espondence ER

 PTOSB/17 (12-04-/2)
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 Palent and Trademark Office: U.S. DEPARTMENT OF COMMERCE.
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for FY 2005				First Named Inver	CKD et al		
Applicant claims sma	all entity status	See 37 CFF	1 1 27	Examiner Name		ia L. Nordmeye	r
				Art Unit	1772		
TOTAL AMOUNT OF	PAYMENT	(\$) \$1	,020.00	Attorney Docket N	lo. GVC.0	00001US	
METHOD OF PAYME	NT (check all	that apply)					
☐ Check ☐ Cred	lit Card	Money Order	☐ None	Other (p	olease identify)	:	
Deposit De	eposit Account	Number:	50-1612	Deposit Ac	count Name	: Warı	n Hoffmann
For the above-identific	ed deposit accour	nt, the Director is	hereby auth	orized to: (check all th	nat apply)		
Charg	e fee(s) indicated	i below		Charge f	ee(s) indicated	i below, except for	r the filling fee
Charg	e any additional t	ee(s) or any un	derpayment o	f 🛛 Credit an	ny overpaymen	its	
WARNING: Information or Information and authoriza	under 37 CFR 1. this form may	become public	. Credit card	I information should	not be inclu	ded on this form	. Provide credit card
FEE CALCULATION	1011 0111 10-200		_				
1. BASIC FILING, SEA	RCH, AND EX	AMINATION	FEES				
	FILING F	EES		H FEES	EXAMIN	ATION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid(\$)
Utility	300	150	500	250	200	100	rees i dialog
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FE	EG						Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (inc	ludina Reissue	es)				50	25
Each independent claim			)			200	100
Multiple dependent clair			•			360	180
						Multiple (	Dependent Claims
Total Claims	Extra Claim	s Fee (\$)		Fee Paid (\$)		Fee (\$)	Fee Paid (\$)
- 20 or HP	-	x	\$50.00 =	\$0.00			
HP = highest number of total	al claims paid for,	if greater than 2	20.				
Indep. Claims	Extra Claim			Fee Paid (\$)			
3 or HP		_ xs		\$0.00			
HP = highest number of ind		paid for, if great	er than 3.				
<ol> <li>APPLICATION SIZE</li> <li>If the specification and of 37 CFR 1.52(e)), the ap</li> <li>See 35 U.S.C. 41(a)(1)(e)</li> </ol>	drawings excee	e due is \$250	of paper (e: 0 (\$125 for :	xcluding electronic small entity) for ea	ally filed sec ch additiona	uence or comp I 50 sheets or f	outer listing under raction thereof.
Total Sheets	Extra She		umber of ea	ch additional 50 or f	raction there	of Fee (\$)	Fee Paid (\$)
- 100		/50 _		(round up to a	whole	x _\$250.00	= \$0.00
OTHER FEE(S)     Non-English specification	m \$120 foo	(no small onti	h, diegount				Fee Paid (\$)
Other (e.g. late filing sur		(no small enti					\$1,020.00

SUBMITTED BY						
Signature	Dh)	W.Hll	Registration No. (Attorney/Agent)	33,711	Telephone	248-364-4300
Nome (Dist)		BICHARD W HO	DEEMANN		Date	01/15/2005

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